Fill in	n this information to identify your case:				Ch	eck or	e box only as d	irected ir	n this form and	in Form
Debt	or 1 Faye Louise Hudson				12	2A-1S	upp.			
Debt (Spou	or 2					■ 1. T	here is no pres	umption	of abuse	
	ed States Bankruptcy Court for the: Eastern Dis	strict of Te	ennes	ssee		;	The calculation to applies will be made of the calculation (Office)	nade und	der Chapter 7 l	
(if kno	e number wn)						The Means Test		,	occurso of
							qualified military		117	
						□ Ch	eck if this is a	n amen	ded filing	
	<u>icial Form 122A - 1</u>									
Ch	apter 7 Statement of Your	Curre	ent	: Monthl	y Inc	om	е			12/19
case i qualif Part	What is your marital and filing status? Check	oted from a f Exemptio e	a pres	sumption of abu	ise becau	se you	do not have prin	narily cor	nsumer debts o	r because of
	Not married. Fill out Column A, lines 2-11.									
	☐ Married and your spouse is filing with you —				•	2-11.				
	Married and your spouse is NOT filing with	n you. Yo	u an	d your spous	e are:					
	Living in the same household and are n		_							
	Living separately or are legally separated penalty of perjury that you and your spous living apart for reasons that do not include	se are lega	ally s	eparated unde	r nonbar	krupto	y law that applie	es or that		
10 the	Il in the average monthly income that you received f 1(10A). For example, if you are filing on September 15, e 6 months, add the income for all 6 months and divide to ouses own the same rental property, put the income fro	the 6-mont the total by	th per 6. Fil	riod would be Ma I in the result. Do	rch 1 thro not inclu	ugh Aud de any i	gust 31. If the amount m	ount of you ore than o	ur monthly incom once. For example	ne varied during le, if both
						Colur Debt		Colum Debto non-fi		
2.	Your gross wages, salary, tips, bonuses, over payroll deductions).	rtime, an	d co	mmissions (be	efore all	\$	0.00	\$	0.00	
3.	<b>Alimony and maintenance payments.</b> Do not i Column B is filled in.	·	•	·		\$	0.00	\$	0.00	
4.	All amounts from any source which are regul of you or your dependents, including child su from an unmarried partner, members of your hou and roommates. Include regular contributions fro filled in. Do not include payments you listed on li	u <b>pport.</b> In usehold, y om a spou	clud our d	e regular contri dependents, pa	ibutions arents,	\$	0.00	\$	0.00	
5.	Net income from operating a business, profe	ssion, or	farm							
	Gross receipts (before all deductions)	\$		Debtor 1 3,391.00						
	Ordinary and necessary operating expenses	-\$		2,105.00						
	Net monthly income from a business, profession, or farm	\$		1,286.00	Copy here ->	\$	1,286.00	\$	0.00	
6.	Net income from rental and other real proper	ty		Debtor 1						
	Gross receipts (before all deductions)		\$	0.00						
	Ordinary and necessary operating expenses		-\$ -	0.00						

Net monthly income from rental or other real property

7. Interest, dividends, and royalties

0.00 Copy here -> \$

0.00

0.00

\$

\$

0.00

0.00

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Faye Louise Hudson Debtor 1 Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. SSI (Both) 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,286.00 0.00 1,286.00 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,286.00 Multiply by 12 (the number of months in a year) **x** 12 15,432.00 12b. The result is your annual income for this part of the form 12b 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. TN Fill in the number of people in your household. 72,442.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

## 14. How do the lines compare?

- 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*. Go to Part 3. Do NOT fill out or file Official Form 122A-2.
- 14b.  $\square$  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*. Go to Part 3 and fill out Form 122A-2.

## 

Debtor 1	Faye Louise Hudson	Case number (if known)
Part 3:	Sign Below	
	By signing here, I declare under penalty of perjury that the in	formation on this statement and in any attachments is true and correct.
	X /s/ Faye Louise Hudson	
	Faye Louise Hudson Signature of Debtor 1	
Da	te 12/22/2023 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.	
	If you checked line 14b, fill out Form 122A-2 and file it with th	uis form.